

over 200 million and almost \$240 million in a couple of years, in five years' time to have gone from under 100 million to well over \$200 million in costs tells us that we've got a problem and I think it's a problem that needs a comprehensive solution. The original bill provided that. It had a wide range of initiatives that included a number of things that I am now asking through the committee amendments to delete, that included initiatives on mental health and drug and alcohol treatment, that included efforts to try to provide certain public health services that were a particular focus. We talked about a number of other things that had a high cost in terms of coverage for individuals under poverty, trying to understand the gaps in the system, the costs in the system and address those. Now what we're talking about with the committee amendments is to say what do we really need to do to change the health care system to address the reforms at the national level and to prepare Nebraska for what I think will eventually happen here and happen across the country. What it comes down to is one word that we use a lot in this Legislature and it's called infrastructure. We do not have an infrastructure in place in this state to address the health care needs of Nebraskans in a comprehensive sense. We have a fragmented system that has these providers and those providers in this community and that community working on and trying to address their particular perspective and concerns but we do not have any sort of comprehensive effort to bring together the different resources and expenditures to understand what we want to try and accomplish through our health system and prioritize our health system, coordinate our health system, cut down the cost and fill in the gaps in the system that will have so many Nebraskans, now about 155,000, without any coverage at all in terms of health insurance. We do not have an infrastructure of a public health system. We have a mental system. We have a developmental disabilities system. We have an alcohol and drug abuse system but we have no public health system in this state. We have city and county services in certain cities and counties in the large areas of the state but the rural counties, the 70 some counties do not have services. Senator Lynch did a study a few years ago about this and found it to be one of our great needs. I think one figure I've heard is that in terms of public health expenditures in Nebraska we are at the bottom of all the states or maybe second or third from the bottom, depending on how things have gone. But we are right rock bottom in terms of how much effort we put into public health services in Nebraska. Likewise, we have no public data system to try and get information about what is happening with our health care